| Approved, SCAO OSM CODE: NRI | | | |
|--|------------------------------------|--|---|
| STATE OF MICHIGAN PROBATE COURT COUNTY OF | INFORMAL AF | ENT TO REQUEST PPOINTMENT OF EPRESENTATIVE | FILE NO. |
| Estate of | | | |
| · | Name ate. A copy of the applica | | ce is being served upon those persons |
| mailed or until 7 days after this notice | | , | |
| The actions you may take include: | | | |
| Upon paying a filing fee, fil | ing a petition for formal p | proceedings to appoint a pe | ersonal representative. |
| Upon paying a filing fee, filing fee, filing fee, filing you have a higher priority to the first priority priority to the first priority priority to the first priority pr | | ormal appointment of yourse | elf as personal representative provided |
| Contacting an attorney for | assistance in representi | ng you in any proceeding y | ou wish to file in the court. |
| The court will not be able to provide y | ou with any legal advice | in completing or filing the f | orms. |
| | | Date | |
| | | Applicant signature | |
| Attorney name | Bar no. | Applicant name | |
| Address | | Address | |

NOTICE TO APPLICANT: You must attach this notice and a proof of service to the application for informal appointment when you file it with the court.

City, state, zip

Telephone no.

City, state, zip

Do not write below this line - For court use only

Telephone no.